



Office **DEC 30 2020**

Statement of Committee Organization

1. Statement Information

Date: 12/28/2020

Type: ☐ New ☒ Amended (if amending, enter MEC ID C131123 & section changed _____)

2. Committee Information

Name of Committee: HILL FOR MISSOURI

Committee Mailing Address, City, State, & Zip: PO Box 359 WENTZVILLE MO 63385 Telephone Number: (636) 422-0271

County Clerk, Board of Election Commissioners, or Federal PAC/Out of State Committee

Committee Type: ☐ Campaign ☒ Candidate ☐ Continuing (PAC) ☐ Debt Service ☐ Exploratory ☐ Political Party

3. Treasurer/Deputy Treasurer Information

Treasurer's Name (First & Last): STEVE MARION

Treasurer's Mailing Address, City, State, & Zip: 111 ROY LANE, WENTZVILLE MO 63385

Treasurer's Email Address (optional): _____

Treasurer's Home Telephone Number: (636) 887-6396 Treasurer's Work Telephone Number: (314) 925-7444

Deputy Treasurer's Name (if one appointed): _____

Deputy Treasurer's Email Address (optional): _____

Deputy Treasurer's Mailing Address, City, State, & Zip: _____

Dep. Treasurer's Home Telephone Number: _____ Dep. Treasurer's Work Telephone Number: _____

4. Additional Committee Information

Additional Committee Officer's Name & Title (if any): _____

Additional Committee Officer's Mailing Address, City, State, & Zip: _____

Connected Organization's Name (if any): _____

Connected Organization's Mailing Address, City, State, & Zip: _____

AMENDMENT

CANDIDATES: Do you have more than one candidate committee? ☐ Yes (refer to instructions on back) ☒ No

5. Official Bank Account Information (required by all committees)

Name & Mailing Address, City, State, & Zip of Financial Institution: _____

Account Name: _____

Account Number: _____

6. Candidate Supported or Opposed (candidate committees must include self, if candidate)

Name & Mailing Address, City, State, & Zip of Candidate: JUSTIN HILL 85 KNOWLEDGE CT LAKE ST LOUIS MO 63367 Telephone Number (Candidate Committees Only): (636) 422-0271

Election Date: 8/2/22 Office Sought & Political Subdivision: STATE SENATE DISTRICT 2 Political Party: REPUBLICAN Support or Oppose: SUPPORT

7. Ballot Measure Supported or Opposed (campaign committees must complete this section)

Name of Ballot Measure: _____

Election Date & Political Subdivision: _____

Support or Oppose: _____

8. Signature(s) Check certification(s) & sign (required by all committees)

☒ I affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I further acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 575 RSMo.

Committee Treasurer: Steve Marion

Candidate (Candidate Committees Only): Justin Hill